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## Attorney Docket Number MPA12US **DECLARATION FOR UTILITY OR** Kia Silverbrook **First Named Inventor DESIGN** COMPLETE IF KNOWN PATENT APPLICATION (37 CFR 1.63) **Application Number** Filing Date ☑ Declaration □ Declaration OR Submitted Submitted after Initial **Group Art Unit** Filing (surcharge (37 CFR 1.16 (e)) with Initial Filing **Examiner Name** required)

As a below named inventor, I hereby declare that:									
My residence, post office address, and citizenship are as stated below next to my name.									
I believe I am the original,	I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural								
names are listed below) o	names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:								
Printhead Assembly with Fluid Supply Connections									
the specification of which (Title of the Invention)									
is attached hereto									
OR was filed on (MM/DD/YYYY) as United States Application Number or PCT International									
Application Number and was amended on (MM/DD/YYYY) (if applicable).									
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as									
amended by any amendment specifically referred to above.									
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.									
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.									
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed		opy Attached?				
Number(s)	Country	(MM/DD/TTT)	NOI CIAIISIOU	YES	NO ,				
					H				
Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:									
I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.									
Application Number	r(s) Filing Date	e (MM/DD/YYYY)							
			Additional provisional application						
	·			ers are listed o emental priority					
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	1		PTO/S	SB/02B attache	•				

[Page 1 of 2]
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## Litility or Design Patent Application DECLARATION

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I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.										ignating the in the prior to disclose application			
U.S. Parent Application or PCT Parent Number					t	Parent Filing Date (MM/DD/YYYY)				Parent Patent Number (if applicable)			
☐ Additional	Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.										ereto.		
As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Parand Trademark Office connected therewith:  Customer Number  OR  Replication practition pumpler listed below.  Label bere							omer Code						
	Nam	e	<u> </u>	Registe	egistered practitioner(s) name/registration nu Registration Number				Name			stration mber	
					1441	1000					i.		
Additional	registered	d practitioner(s)	named o	n suppl	ementa	l Registere	d Prac	titioner Ir	nformation sl	neet PTO	/SB/020	attached here	eto.
Direct all correspondence to: X Customer Number or Bar Code Label 24011 OR Correspondence address below													
Name	Kia S	Silverbrook											
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City	Balm	nain				s	tate	NSW <b>ZIP</b> 2041			1		
Country	Austi	tralia Telephone 61-			ne 61-2	-9818-6633 Fax 61-				2-9555-7762			
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.													
Name of Sole or First Inventor:													
Given Name (first and middle [if anv])						Family Name or Surname							
KIA						SILVERBROOK							
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Additional	linuanta	en ara baine e	omod o	n the			al Ad	ditional	Inventor(c)	choot/s	\ DTO	SB/02A attac	shod barata



## MPA12US

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## **DECLARATION**

ADDITIONAL INVENTOR(S)
Supplemental Sheet
Page 1 of \_\_\_ 1

		-	**********				
Name of Additional Joint Inventor if an	.,,		1 A 226622 has been \$1		is analysis of investor		
Name of Additional Joint Inventor, if an	y:		A petition has been file				
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City Balmain State NSW			ZIP 2041	ountry Australia			

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